

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/554351

FILING DATE

18 OCT 2006

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3	0		1			
4	0		1			
5	1		1			
6	1		1			
7	1		1			
8	0		0			
9	0		0			
10	0		1			
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TOTAL IND.	2	↓	2	↓		↓
TOTAL DEP.	8	↔	8	↔		↔
TOTAL CLAIMS	10	████████	10	████████		████████

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓		↓		↓
TOTAL DEP.		↔		↔		↔
TOTAL CLAIMS		████████		████████		████████

BEST AVAILABLE COPY